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| **FA-logo-color-pantone1807-whiteonred-sm** | Faculty Association &  Guild of Administrative Officers  Retraining Application |  |

***Use this form to apply for faculty retraining.***

Use this form if applying to be funded for retraining in areas or disciplines where the college expects growth, as defined in the College Brief from the Vice President for Academic and Student Affairs for that academic year**.**

All questions must be completed in order for your application to be considered. Do not include links to external sources; incorporate all information into this form. This form must be submitted electronically to Kathy Keane in the Office of the Vice President for Academic and Student Affairs ([keanek@sunysuffolk.edu](mailto:keanek@sunysuffolk.edu) • 631-451-4244) no later than April 15.

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| **Date of Application:** |  | | | | | | | |
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| **Affiliation:** | * Faculty Association | | * Guild | | | | |
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| **Intended Semester  of Development:** | * Summer |  | * Fall |  | * Spring |  |

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| **Name** |  | | | | |
|  |  | | | | |
| **Discipline or Area** |  | | | | |
|  |  | | | | |
| **Degrees** | **degree** |  | **field** |  | **year awarded** |
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| **Proposed**  **Discipline**  **or Area** |  |

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| 1. **Describe your previous experience and education related to the proposed discipline or area.** |
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| 1. **Identify the college or university you plan to attend or other means by which retraining will be accomplished.** |
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| 1. **Describe the proposed degree and/or program or course of study.** |
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| 1. **Provide a written description of the scope and goals of the proposed program and how they relate to your professional and personal goals.** |
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| 1. **Provide a proposed outline, by semesters, of the courses you plan to take or the program you plan to follow. Include a copy of the current catalog description of the program or courses (or other documents descriptive of your program).** |
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| 1. **Explain the anticipated cost per semester (tuition, books, fees) of your program or course of study. Attach a copy of the current catalog statement of tuition and fees or equivalent information for your program.** |
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| 1. **Explain any anticipated need for reassigned time for each semester involved.** |
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| *I have reviewed the contract language, Article V.D.5, relating to Faculty Development and Retraining Leaves and I understand that a written report and transcript will be required within eight weeks of completing the course(s) or program that includes an updated application.* | | |
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| *signature* | | *date* |